Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

|          | 7). 1 0 ( )  |   |   |  |   |  |                           |                                     |                       |  |  |
|----------|--|---|---|--|---|--|---------------------------|-------------------------------------|-----------------------|--|--|
|          | UTILITY  |   | Attorney Dock                                   | et No.   | PC25035   |  |                           |                                     | _                     |  |  |
| P        | ATENT APPLICAT   | ION   | First Inventor                                  |  | Laura C. Blumberg   |  |                           |                                     |                       |  |  |
|          | TRANSMITTAL  |   | Title   |  | Novel Piperidine Derivatives  |  |                           |                                     |                       |  |  |
| (Only fo | or new nonapplications under 37C.F.R. §1.53(I  | (b))  | Express Mail L                                  | abel No.   | EV346370031US   |  |                           |                                     |                       |  |  |
| See M    | APPLICATION ELE  IPEP chapter 600 concerning utility pate  |   | contents.                                       | ADI  | ORESS TO:   | Commis<br>Box 145  | sioner for                |                                     | PTO                   |  |  |
| 1.<br>2. | *Fee Transmittal Form (e.g. (Submit an original, and a duplicate f  Applicant claims small entity See 37 CFR 1.27  | for fee processi  |   |  | CD-ROM or CD-R in duplicate, large table or computer Program (Appendix) cleotide and/or Amino Acid Sequence Submission applicable, all necessary) |  |                           |                                     | 1904 U.S.<br>10/61684 |  |  |
| 3.       | Specification [T] (preferred arrangement set for a Descriptive title of the Inv Cross References to Rel - Statement Regarding Ference to sequence I or a computer program Ii | vention<br>lated Applica<br>d sponsored<br>isting, a tabl   | l R&D<br>e,                                     |  | b. Specificati  | omputer Readat<br>tion Sequence I<br>D-ROM or CD-f<br>aper<br>atement verifyin | Listing on                | es)                                 | Ω ∃                   |  |  |
|          | - Background of the Invent   |   |   |  | ACCOMPANYING APPLICATION PARTS  |  |                           |                                     |                       |  |  |
|          | <ul> <li>Brief Summary of the Inv</li> <li>Brief Description of the D</li> <li>Detailed Description</li> <li>Claim(s)</li> <li>Abstract of the Disclosure</li> </ul>         | Drawings <i>(if t</i>                                       | īled)   | 9<br>10  | 10. 37 CFR 3.73(b) Statement Power of A (when there is an assignee)   |  |                           |                                     |                       |  |  |
| 4.<br>5. | Drawing(s) (35 U.S.C. 113)   | Total sheets  |   | 12.  | Information Statement   | n Disclosure<br>(IDS)/PTO-144<br>y Amendment                                   | Ĺ                         | Copies of Citations                 | IDS                   |  |  |
|          | Signed statement atta<br>named in the prior ap   | cation (37 CF) conal with Box 1 DN OF INVEL cached deleting | R §1.63(d)) 18 completed) NTOR(S) g inventor(s) | 14. L  | (Should be specifically itemized)  15. Certified Copy of Priority Document(s) (if foreign priority is claimed)                                    |  |                           |                                     |                       |  |  |
| 6        | 1.63(d)(2) and 1.33(b  Application Data Sheet. See   |   | 76  | 17.  | or its equiv  | valent.  |                           |                                     |                       |  |  |
| 18.      | If a CONTINUING APPLICATION or in an Application Data Sheet under  | 37CFR 1.76.   | _   |  |   | ·  |                           |                                     |                       |  |  |
|          | Continuation Division  |   | Continuation                                    | ı-ın-part (Cl                                    |   |  |                           |                                     |                       |  |  |
| Box 5    | Prior application information:  ONTINUATION OR DIVISIONAL APPS b is considered a part of the disclosus accorporation can only be relied upon                                 | ure of the acc  | tire disclosure of<br>ompanying conti           | nuation or di                                    | visional applic   | ation and is here  | or declarate<br>by incorp | tion is supplied<br>porated by refe |                       |  |  |
|          |  | 18.   |   |  | E ADDRES  |  |                           |                                     |                       |  |  |
|          | Customer Number or Bar Code Label  | (Insert Cus   | tomer No. or Atta                               |  | label here)   | or Correspo  | ondence ad                | ddress below                        |                       |  |  |
| Name     | *****  |   |   |  |   |  |                           |                                     |                       |  |  |
| Addr     | ess  |   | State   |  |   |  |                           |                                     |                       |  |  |
| City     | <b>.</b>   | · · · · · · · · · · · · · · · · · · ·                       | Zip C de  |  |   |  |                           |                                     |                       |  |  |
| Coun     | NAME (Print/type) Lisa A. San  |   | elephone  | Fax   Registration No. (Attorney/Agent)   43,080 |   |  |                           | <del></del>                         |                       |  |  |
| ŀ        | Signature Lisa A. San  | - am  | 11/   | เงอมเอนสมเ                                       |   |  |                           | 03                                  |                       |  |  |
| L        |  |   |   |  |   | •  |                           |                                     |                       |  |  |

PTO/SB/17(01/03)
Approved for use through 04/30/2003. OMB 0651-0032

| U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMME   |
|--|
| Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB nu |

|  |                          |                    |                             |                  |                                   |                                   | Complete if Known                               |                          |                       |                                   |   |                            |              |  |
|--|--------------------------|--------------------|-----------------------------|------------------|-----------------------------------|-----------------------------------|---|--------------------------|-----------------------|-----------------------------------|---|----------------------------|--------------|--|
| FEE TRANSMITTAL  |                          |                    |                             |                  |                                   | Application Number To be assigned |   |                          |                       |                                   |   |                            |              |  |
| for FY 2003  |                          |                    |                             |                  |                                   |                                   | Filing Date                                     |                          |                       |                                   | Herewith  |                            |              |  |
|  |                          |                    |                             |                  |                                   |                                   |   |                          |                       |                                   | Laura C. Blumb rg                                     |                            |              |  |
| 101112000  |                          |                    |                             |                  |                                   |                                   |   | r Name                   |                       |                                   | To be assigned  |                            |              |  |
| ☐ Applicant claims small status. See 37 CFR 1.27   |                          |                    |                             |                  |                                   |                                   |   |                          |                       |                                   | To be assigned  |                            |              |  |
| T tal Amount of Payment (\$)750.00   |                          |                    |                             |                  |                                   |                                   |   | Docket                   | No.                   |                                   | PC25035A  |                            |              |  |
| METHOD OF PAYMENT (check all that apply)   |                          |                    |                             |                  |                                   |                                   |   |                          |                       |                                   |   |                            |              |  |
| ☐ Check  |                          |                    |                             |                  | Other 🔲 Nor                       | ne                                | FEE CALCULATION (continued)  3. ADDITIONAL FEES |                          |                       |                                   |   |                            |              |  |
| ☑ Deposit Account:   |                          |                    |                             |                  |                                   |                                   |   | ntity                    | S                     | mall Entity                       |   |                            |              |  |
| Deposit<br>Account 16-1445   |                          |                    |                             |                  |                                   |                                   | Fee   | Fee                      | Fe                    |                                   | Fee Descr   | iption                     | Fee          |  |
| Number   | 10-144                   |                    |                             |                  |                                   |                                   | Code  | (\$)                     | Co                    | de (\$)                           |   |                            | Paid         |  |
| Deposit  |                          |                    |                             |                  |                                   |                                   | 1051  | 130                      | 205                   | 51 65                             | Surcharge – late fee o                                | or oath                    |              |  |
| Account<br>Name  | Pfizer I                 | nc.                |                             |                  |                                   |                                   |   |                          |                       |                                   |   |                            |              |  |
|  |                          |                    |                             |                  |                                   |                                   | 1052  | 50                       | 205                   | 52 25                             | Surcharge-late filing f                               | ee or cover                |              |  |
| The Commiss  |                          |                    | ·                           |                  | ••                                |                                   |   | 1                        |                       |                                   | sheet   |                            |              |  |
|  |                          |                    |                             | •                | overpayments                      |                                   | 1053  | 130                      | 105                   |                                   | Non-English specifica                                 |                            |              |  |
|  | •                        |                    |                             | •                | this application                  |                                   | 1812  | 2,520                    | 181                   | •                                 | For filing a request for                              |                            | i            |  |
|  | ee(s) indic<br>deposit a |                    | w, except to                | or the filing    | fee to the abov                   | /e-                               | 1804  | 920*                     | 180                   | 04 920*                           | Requesting publication<br>Examiner action             | n of SIR prior to          |              |  |
| identified deposit decediti.   |                          |                    |                             |                  |                                   |                                   |   | 1,840*                   | 180                   | 05 1,840*                         |   | g publication of SIR after |              |  |
|  | ,                        | FEE (              | CALCULAT                    | ION              |                                   |                                   | 1251  | 110                      | 225                   | 51 55                             | Extension for reply wit                               | thin first month           |              |  |
| 1. BASIC FILE  | ING FEE                  | )                  |                             |                  |                                   |                                   | 1252  | 410                      | 225                   | 52 205                            | Extension for reply wit                               |                            |              |  |
| Large Entity   | Sma                      | II Entity          |                             |                  |                                   |                                   | 1253  | 930                      | 225                   | 53 465                            | Extension for reply within third month                |                            |              |  |
| Fee Fee (\$)   | <u>Fee</u><br>Code       | <u>Fee</u><br>(\$) | Fee De                      | <u>scription</u> | Fee Paid                          | ı                                 | 1254  | 1,450                    | 225                   | 54 725                            | Extension for reply wit month                         | thin fourth                |              |  |
| 1001 750   | 2001                     | 375                | Utility filing              | g fee            | 750                               |                                   | 1255  | 1,970                    | 225                   | 55 985                            | Extension for reply wit                               | thin fifth month           |              |  |
| 1002 330   |                          | 165                | Desian fili                 |                  |                                   |                                   | 1401  | 320                      | 240                   |                                   | Notice of Appeal                                      |                            |              |  |
| 1003 520<br>1004 750   |                          | 260<br>375         | Plant filing<br>Reissue fil |                  |                                   |                                   | 1402<br>1403                                    | 320<br>280               | 240<br>240            |                                   | Filing a brief in support Request for oral heari      |                            | <del> </del> |  |
| 1005 160   |                          | 80                 | filing fee                  |                  |                                   |                                   | 1451  | 1,510                    | 145                   |                                   | Petition to institute a p                             |                            |              |  |
|  | ı                        |                    | SUBTOT                      | AL (1)           | 750                               |                                   | 1452  | 110                      | 245                   | 52 55                             | proceeding Petition to revive - una                   | woidablo                   |              |  |
| 0 EVED 4 CL  | A114 FFF                 | - FOD 11T          |                             | • •              | 7.50                              |                                   |   |                          |                       |                                   |   |                            |              |  |
| 2. EXTRA CL  | AIM FEE:                 | S FOR UI           | Extra                       | Fee from         |                                   |                                   | 1453  | 1,300                    | 245                   |                                   | Petition to revive - uni                              |                            |              |  |
|  |                          |                    | Claims                      | below            | Fee Paid                          | i                                 | 1501  | 1,300                    | 250                   | 01 650                            | Utility issue fee (or rei                             | ssue)                      |              |  |
| Total Claims   | 15                       | -20**=             | 0                           | x 18             | = 0.0                             | 0                                 | 1502  | 470                      | 250                   | 02 235                            | Design issue fee                                      |                            |              |  |
| Independent  |                          |                    | 0                           | 1503             | 630                               | 250                               | 315   | Plant issue fee          |                       |                                   |   |                            |              |  |
| Claims  Multiple Depend  | lant                     |                    |                             | 280              | = 0.0                             | ٥                                 | 1460  | 130                      | 146                   | 30 130                            | Petitions to the Comm                                 |                            |              |  |
|  |                          | paid, if gr        | eater: For R                |                  |                                   |                                   | 1807  | 50                       | 180                   |                                   | Processing fee under                                  |                            |              |  |
| ** or number previously paid, if greater; For Reissues, see below  Large Entity Small Entity |                          |                    |                             |                  |                                   | 1801                              | 750   | 280                      |                       | Request for Continued Examination |   |                            |              |  |
| Fee Fee<br>Code (\$)   | Fee<br>Code              | Fee<br>(\$)        | Fee Desc                    | cription         |                                   |                                   | 1806  | 180                      | 180                   | 06 180                            | (RCE) Submission of Informa                           | ation Disclosure           |              |  |
| 1202 18  | 1                        | 9                  | Claims in e                 | excess of 20     | )                                 |                                   | 8021  | 40                       | 802                   | 21 40                             | Statement Recording each paten per property (times nu |                            |              |  |
| 1201 84  | 2201                     | 42                 | Independe                   | ent claims in    | excess of 3                       |                                   | 1809  | 750                      | 280                   | 09 375                            | properties) Filing a submission after final rejection |                            |              |  |
| 1203 280   | 2203                     | 140                | Multiple de                 | ependent cla     | aim, if not paid                  |                                   | 1810  | 750                      | 281                   | 10 375                            | (37 CFR 1.129(a)) For each additional invention to    |                            |              |  |
| 1204 84  | 2204                     | 42                 | **Reissue<br>original p     |                  | t claims over                     |                                   | Other Fee                                       | l<br>Other Fee (specify) |                       |                                   | be examined (37 CFR 1.129(b))                         |                            |              |  |
| 1205 18  |                          |                    |                             |                  | *Reduced by Basic Filing Fee Paid |                                   |   |                          |                       |                                   |   |                            |              |  |
| SUBTOTAL (2) (\$) 0.00 SUBTOTAL (3) (\$) 0.00  |                          |                    |                             |                  |                                   |                                   |   |                          | 0.00                  |                                   |   |                            |              |  |
| SUBMITTED  |                          |                    |                             |                  |                                   |                                   |   |                          | Complete (if Applicab | le)                               |   |                            |              |  |
| Name (Printed/Type) Lisa A. Samuels  |                          |                    |                             |                  |                                   | , Reg. Number 43,080              |   |                          |                       |                                   |   |                            |              |  |
| Signature LOW Sauve  |                          |                    |                             |                  |                                   |                                   |   |                          |                       | 860-686-0349                      |   |                            |              |  |